

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 2

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

CDM Smith Inc.
Fort Worth, TX United States

Certificate Number:
2016-66073

Date Filed:
06/06/2016

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of Fort Worth, Texas

Date Acknowledged:

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

02009
Village Creek Water Reclamation Facility Peak Flow Management Facilities

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Walters, Gae	Boston, MA United States	X	
	Wall, Timothy	Boston, MA United States	X	
	VanAntwerp, Robert	Boston, MA United States	X	
	Tunncliffe, Peter	Boston, MA United States	X	
	Stevenson, Howard	Boston, MA United States	X	
	Shea, Paul	Boston, MA United States	X	
	O'Brien, William	Boston, MA United States	X	
	Hughes, Colleen	Boston, MA United States	X	
	Desmaris, Thierry	Boston, MA United States	X	
	Hickox, Stephen	Boston, MA United States	X	

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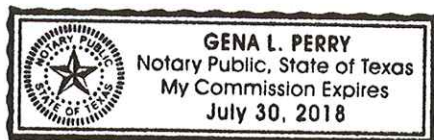
4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

☐

6 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



[Signature]

Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said J. Dan Shannon, this the 6th day of June, 2016, to certify which, witness my hand and seal of office.

[Signature]

Signature of officer administering oath

Gena L. Perry

Printed name of officer administering oath

Office Services Coordinator

Title of officer administering oath